	PAIENI	Effec	9/744686										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								7	SMALL TYPE	ENTITY	OR	OTHER	R THAN ENTITY
F	OR		NUMBI	ER FILED		NUMBER	EXTRA		RATE	FEE		RATE	FEE
В	ASIC FEE		1/10/05							380.00	OR		760.00
TOTAL CLAIMS			20 minus 20=)= * Ø			X \$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =			= * Ø			X 39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=		
* 11	* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED - PART II								OTHER THAN				
			IMN 1) NMS	1		Column 2) HIGHEST	(Column 3)	l r	SMALL		OR 7 1	SMIALL	
AMENDMENT A		REMA AF	AINING TER DMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**	 	=		X \$ 9=		OR	X\$18=	
AME	Independent	*		Minus	***		=		X 39=		OR	X78=	
	FIRST PRESE	NIAHO	N OF MU	DETIPLE DE	PENL	DENT CLAIM	·		+130=		OR	+260=	
 			,						TOTAL DDIT. FEE	. :	OR .	TOTAL ODIT, FEE	
		(Colu	mn 1)		(C	Column 2)	(Column 3)	, AI	DUII. FEE		• ′		
MENDMENT B		REMA AF	UMS UNING TER OMENT	·	PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	-	Minus	**	,	=		X\$ 9=		OR	X\$18=	
_	Independent	*		Minus	***		=		X 39=		OR	X78=	
Α.	FIRST PRESE	NTATIO	N OF ML	JLTIPLE DE	PEND	ENT CLAIM		-		1.			
•	. •			٠	·		•	L	+130=	N.	OR	+260=	
	. • .							AE	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE	
		(Colu				olumn 2)	(Column 3)						
NTC		CLA REMA	INING		PA	HIGHEST NUMBER EVIOUSLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
≝ . ⊦		AFT AMENT			F	PAID FOR				FEE	L		FEE_
MON	Total			Minus	**	PAID FOR	=		X\$ 9=	FEE	OR	X\$18=	FEE
MENDME	Total Independent	AMEN		Minus Minus		PAID FOR	=	-		FEE	OR		FEE_
AMENDMENT		* *	DMENT	Minus	**		 	-	X\$ 9= X39=	FEE	OR OR	X\$18= X78=	FEE
	Independent FIRST PRESE	* * NTATION	OMENT	Minus ULTIPLE DEF	*** ***	ENT CLAIM	=		X39= +130=	FEE	t		FEE
* If	Independent FIRST PRESE the entry in colur the "Highest Nur	* NTATION	N OF MU	Minus ULTIPLE DEF e entry in colu id For IN THI	*** PEND mn 2, S SPA	ENT CLAIM write "0" in col	umn 3. n 20, enter *20.*		X39=		OR OR	X78= +260=	FEE
* [[Independent FIRST PRESE	* NTATION In 1 is less the prevented in the prevented i	N OF MU	Minus ILTIPLE DEF e entry in colu id For IN THI id For IN THI	*** PEND mn 2, S SPA S SPA	ENT CLAIM write "0" in col CE is less that CE is less that	umn 3. n 20, enter *20.* n 3, enter *3.*	AD	X39= +130= TOTAL DIT. FEE		OR OR OR	X78= +260= TOTAL DDIT. FEE	FEE

Application or Docket Number